

ISSUE SLIP ATTACHMENT AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|-------------|--------------|-----------------|
| FEE DETERMINATION | <i>A.H.</i> | <i>22192</i> | <i>10/7/98</i> |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>22</i> | <i>70047</i> | <i>10-20-98</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 8/19/94 |
| 2 | 9/1/94 |
| 3 | 9/1/94 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
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